

**2004 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2004**


FILED

2004 APR 21 PM 3:47

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**DOCUMENT # B03000000113**

1. Entity Name  
 ORANGE-CO, LP



Principal Place of Business  
 2711 CENTERVILLE ROAD, SUITE 400  
 WILMINGTON, DE 19808

Mailing Address  
 2711 CENTERVILLE ROAD, SUITE 400  
 WILMINGTON, DE 19808

2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

City & State

Zip Country



02112004 Chg-LP CR2E003 (10/03)

4. FEI Number  
 27-0050129

Applied For  
 Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

CORPORATION SERVICE COMPANY  
 1201 HAYS STREET  
 TALLAHASSEE, FL 32301-2525

**7. Name and Address of New Registered Agent**

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record: **\$22,000,000.00**

10. Amount of Capital Contributions in FLORIDA to date.

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**  
**NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	L03000006431	STREET ADDRESS	
NAME	ORANGE-CO, LLC	CITY - ST - ZIP	
STREET ADDRESS	3003 TAMIAMI TRAIL NORTH, SUITE 400		
CITY - ST - ZIP	NAPLES, FL 34103		
DOCUMENT #		STREET ADDRESS	100036066041
NAME		CITY - ST - ZIP	05/11/04--01071--020 **526.25
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STREET ADDRESS			
CITY - ST - ZIP			

STAPLE CHECK HERE

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:  #15104 239-434-4027

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

James A. Mercer, Vice President